

Other Factors

In performing this analysis there were two factors that simply could not be quantified due to lack of any relevant data. First of all as can be seen from Appendix A, our data base from which the GNP BLI was calculated included almost no employees working for employers with fewer than 500 employees. We believe that this tends to overstate the GNP BLI, because such limited data as exists suggests that the smaller the employer the less generous the benefits, but we cannot make a definitive statement to that effect. Secondly our analysis only incorporated the impact of SFAS 106 with respect to employer sponsored post-retirement medical plans. SFAS 106 also applies to Life and Dental plans as well as certain other miscellaneous benefits (e.g., subsidized telephone rates for retirees). As noted, there is simply no accessible data on the prevalence and magnitude of these plans in the GNP. We can, however, make two relevant observations:

- ° In general, post-retirement medical plans generate far greater SFAS 106 cost than post-retirement life, dental and other plans.
- ° If an employer does not sponsor a post-retirement medical plan it is almost certain that it does not provide any other post-retirement benefit coverage (other than pension).

Based on the above and the fact that only 26.8% of employees nationally will get post-retirement medical benefits subject to SFAS 106, we conclude that the inclusion of Life, Dental, and other non-pension benefits in the analysis had such data been available would not have had a material impact on the results.

Conclusion

Remembering that at each stage of our calculation process we have sought, when faced with a choice, to adopt a conservative stance and reviewing the results of this sensitivity analysis, we feel confident that our conclusions represent a reasonably accurate reflection of what is likely to happen in practice.

APPENDIX

V. APPENDIX A - SUMMARY OF DATA

The tables, charts, and graphs on the following pages summarize the data utilized in this analysis. Included are the following:

- ° Summary of Godwins Company Data Base.
- ° Summary of BLI calculations.
- ° Comparison of TELCO and the GNP with respect to Demographic, Economic, and Actuarial factors.
- ° Summary of GAO findings on National Prevalence of Post-Retirement Medical Plans.

UNITED STATES TELEPHONE ASSOCIATION
POST-RETIREMENT HEALTH CARE STUDY
SUMMARY OF GODWINS DATA BASE

I. Companies with Post-Retirement Medical Plan:

Active Lives:	1 - 24		25 - 99		100 - 499		500 +		Total	
	# COS	# EES	# COS	# EES	# COS	# EES	# COS	# EES	# COS	# EES
Mining & Manuf.	0	0	2	135	13	5,095	431	11,124,456	446	11,129,686
Construction	0	0	0	0	0	0	6	94,893	6	94,893
Transportation	0	0	0	0	0	0	78	1,472,589	78	1,472,589
Retail	0	0	0	0	1	185	30	1,883,869	31	1,884,054
Finance/Insur.	0	0	2	115	13	4,078	207	3,545,526	222	3,549,719
Consumer Serv.	0	0	1	50	3	1,002	43	779,350	47	780,402
TOTAL	0	0	5	300	30	10,360	795	18,900,683	830	18,911,343

II. Companies with No Post-Retirement Medical Plan:

Active Lives:	1 - 24		25 - 99		100 - 499		500 +		Total	
	# COS	# EES	# COS	# EES	# COS	# EES	# COS	# EES	# COS	# EES
Mining & Manuf.	6	63	11	614	22	5,287	86	893,483	125	899,447
Construction	1	9	0	0	1	160	5	23,153	7	23,322
Transportation	1	19	0	0	5	1,065	13	77,332	19	78,416
Retail	0	0	0	0	3	760	15	453,510	18	454,270
Finance/Insur.	0	0	2	65	3	740	28	168,205	33	169,010
Consumer Serv.	3	36	1	30	6	1,395	29	484,552	39	486,013
TOTAL	11	127	14	709	40	9,407	176	2,100,235	241	2,110,478

UNITED STATES TELEPHONE ASSOCIATION

Post-Retirement Health Care Study Summary of BLIs Based on Godwins' Database

Average BLI Weighted by Number of Employees

<u>Industry</u>	<u>Pre Age 65</u>	<u>Post Age 65</u>	<u>No. of Companies</u>	<u>No. of Employees</u>
Agriculture, Mining, Manufacture & Wholesale Trade	0.7232	0.2340	446	11,129,686
Construction	0.7758	0.0604	6	94,893
Transportation & Utilities	0.7974	0.2643	78	1,472,589
Retail Trade	0.4730	0.0603	31	1,884,054
Finance & Insurance	0.6721	0.1926	222	3,549,719
Consumer Services	0.5771	0.1267	47	780,402
TOTAL	0.6887	0.2060	830	18,911,343

<u>Company Size</u>	<u>Pre Age 65</u>	<u>Post Age 65</u>	<u>No. of Companies</u>	<u>No. of Employees</u>
1-24 Employees			0	0
25-99 Employees	0.4850	0.1476	5	300
100-499 Employees	0.6482	0.1787	30	10,360
500+ Employees	0.6887	0.2060	795	18,900,683
TOTAL	0.6887	0.2060	830	18,911,343

UNITED STATES TELEPHONE ASSOCIATION

Post-Retirement Health Care Study Comparison of TELCO Demographic and Economic Structures and Actuarial Basis to National Averages

Demographic

	<u>TELCO</u>	<u>Employers in GNP</u>
Total Active Employees	613,193	114,400,000 ¹
Active Employees covered by Retiree Medical Plans subject to SFAS 106	613,193	30,700,000 ¹
Retirees covered by Medical Plans	294,482	5,300,000 ¹
Average Age of Actives	41.6	38.2 ²
Average Service of Actives	16.6	8.5 ³

Economic

Compensation Per Employee	\$38,533	\$29,500 ⁴
Average Claim per Retiree	\$3,075	\$1,802 ⁵
Labor Cost as a % of Value Added	38.5% ⁶	64.3% ⁴
Value Added as a % of Output	74.3% ⁶	100%
Accumulated VEBA assets	\$1,258.8 million	N/A
Annual VEBA contributions in excess of claims	300.3 million	N/A

Actuarial

Pre-Retirement Turnover	T-2 ⁷	T-6 ⁸
Retirement Age	Table ⁷	63 ⁹
1991 SFAS 106 expense	\$2,693.1 million	N/A

1. Source - U.S. General Accounting Office
2. Source - U.S. Dept. of Labor, Bureau of Labor Statistics
3. Source - U.S. Bureau of the Census Current Population Reports
4. Source - U.S. Dept. of Commerce, Bureau of Economic Analysis Survey of Current Business
5. Source - 1990 Hewitt Associates Survey of Retiree Medical Benefits brought forward to 1991 with 19% trend
6. Source - 1990 ARMIS 43-02's for Price Cap LECs
7. See tables on page 48 for more detail
8. Source - Midpoint of Standard Tables used in generally accepted Actuarial Practice
9. Source - The Gerontologist Vol. 28 No. 4

UNITED STATES TELEPHONE ASSOCIATION

Post-Retirement Health Care Study

TELCO Retirement Rates

<u>Age</u>	<u>Rate of Retirement</u>
55-61	9.54%
62	25.00%
63	10.00%
64	10.00%
65	67.00%
66-69	10.00%
70	100.00%

Comparison of TELCO Turnover Rates vs. "Standard" Rates

Probability of Remaining in Service Until Age 55

<u>Table</u>	<u>T-1</u>	<u>TELCO T-2</u>	<u>GNP T-6</u>	<u>T-11</u>
<u>Current Age</u>				
30	.743	.505	.250	.013
35	.873	.650	.363	.047
40	.958	.811	.510	.141
45	.995	.935	.687	.344
50	1.000	.992	.871	.664

Notes

1. Standard Tables in use range from T-1 (most conservative) through T-11 (least conservative). T-6 represents mid-point of range.
2. TELCO utilizes customized assumption most closely approximated by T-2.
3. Supporting evidence for low incidence of turnover at TELCO relative to national average can be seen by the higher average age and past service of TELCO employees relative to average age and service of national working population.

UNITED STATES TELEPHONE ASSOCIATION

Post-Retirement Health Care Study Summary of Data on National Prevalence of Post-Retirement Medical Benefit Plans (Source = United States General Accounting Office)

Covered Employees* by Industry

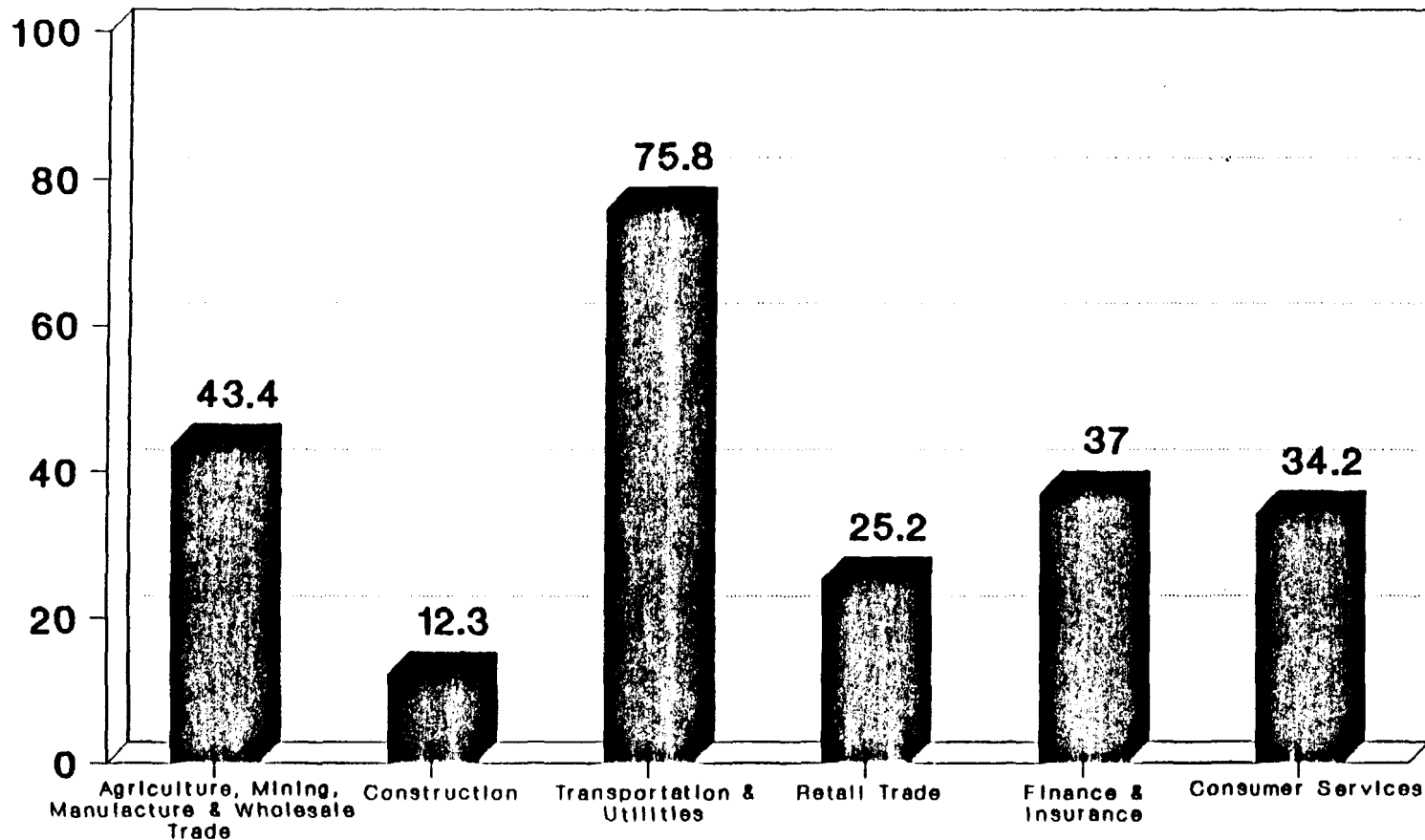
<u>Industry</u>	<u>Total Employees</u>	<u>Covered Employees</u>	<u>% Total Employees Who Are Covered</u>	<u>% of Covered Employees in Industry</u>
Agriculture, Mining, Manufacture & Wholesale Trade	26,729,660	11,602,872	43.4 %	30.17 %
Construction	4,592,367	562,891	12.3 %	1.46 %
Transportation & Utilities	11,674,827	8,853,209	75.8 %	23.02 %
Retail Trade	15,717,209	3,962,734	25.2 %	10.31 %
Finance & Insurance	28,210,193	10,431,800	37.0 %	27.13 %
Consumer Services	8,895,653	3,040,556	34.2 %	7.91 %
TOTAL	95,819,909	38,454,062	40.1 %	100.00 %

Covered Employees* by Company Size

<u>Company Size</u>	<u>Total Employees</u>	<u>Covered Employees</u>	<u>% Total Employees Who Are Covered</u>	<u>% of Covered Employees by Company Size</u>
1-24 Employees	13,384,195	556,209	4.2 %	1.45 %
25-99 Employees	12,713,231	1,663,938	13.1 %	4.33 %
100-499 Employees	19,631,184	3,847,903	19.6 %	10.00 %
500+ Employees	50,091,299	32,386,012	64.7 %	84.22 %
TOTAL	95,819,909	38,454,062	40.1 %	100.00 %

*Covered Employees means employees who work for companies which sponsor post-retirement medical plans. The GAO estimates that only 30.7 million of the 38.5 million covered employees actually could potentially qualify to receive coverage from company sponsored plans. The remaining 7.8 million employees represent those working for non-covered groups within the company (e.g. a subsidiary which does not participate in the company's plan) or employees who are covered by multi-employer plans which are not subject to SFAS 106.

**United States Telephone Association
Post-Retirement Health Care Study
Summary of Data on National Prevalence
of Post-Retirement Medical Benefit Plans**



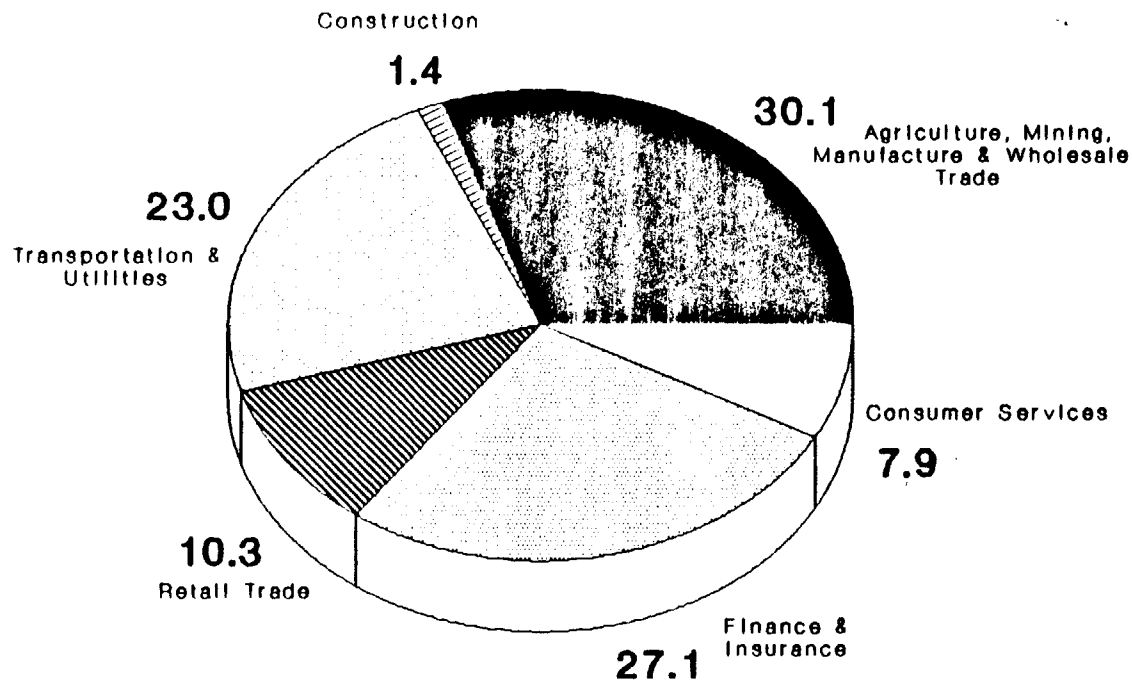
% Total EE's Who Are Covered by Industry

(Source = United States General Accounting Office)

Godwins

Godwins

United States Telephone Association Post-Retirement Health Care Study Summary of Data on National Prevalence of Post-Retirement Medical Benefit Plans

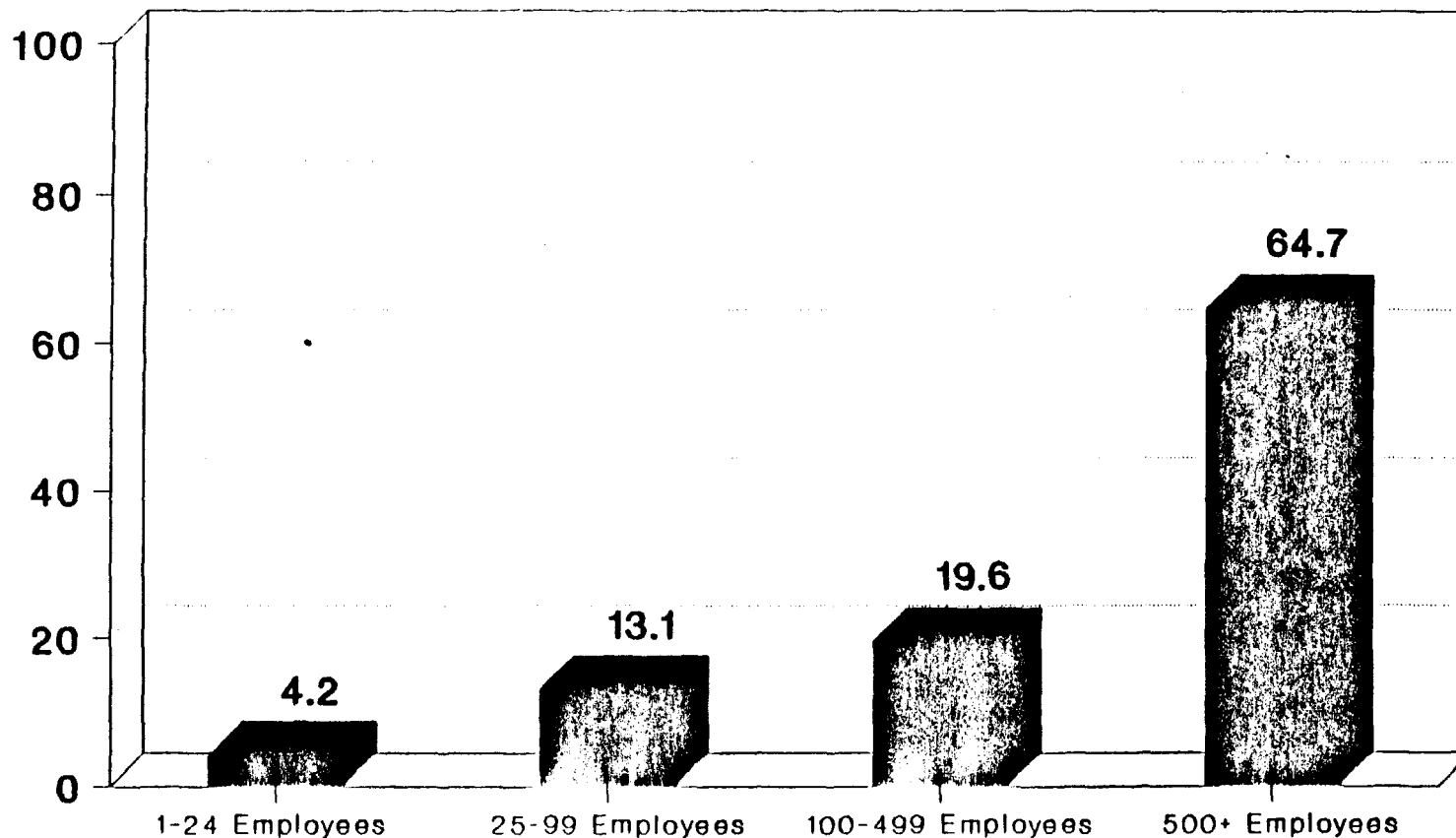


% of Covered Employees by Industry

(Source = United States General Accounting Office)



**United States Telephone Association
Post-Retirement Health Care Study
Summary of Data on National Prevalence
of Post-Retirement Medical Benefit Plans**



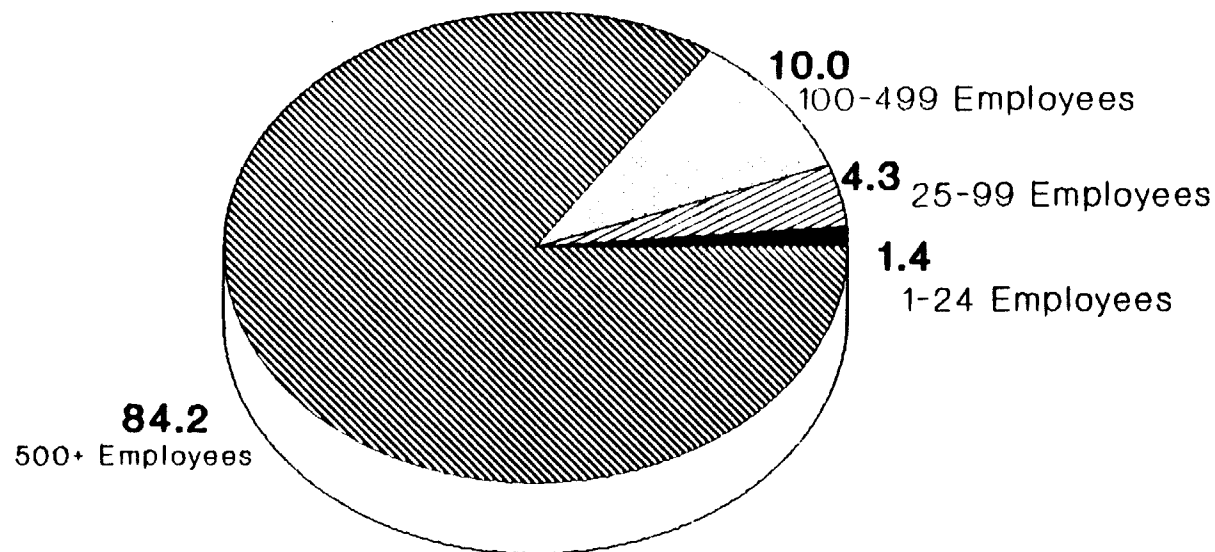
% Total EE's Covered by Company Size

(Source = United States General Accounting Office)

Godwins

Godwins

United States Telephone Association Post-Retirement Health Care Study Summary of Data on National Prevalence of Post-Retirement Medical Benefit Plans



% of Covered Employees by Company Size

(Source = United States General Accounting Office)



APPENDIX B - METHODS AND ASSUMPTIONS

Below is a description of the key methods and assumptions used for the derivation of the Demographic Adjustment as well as the basic BLI calculations. The methods and assumptions utilized in developing the other Adjustments are sufficiently documented in Section III.

Demographic Adjustment

The three adjustments making up the Demographic Adjustment were developed by calculating and comparing SFAS 106 costs for sample populations incorporating the GNP and TELCO demographic characteristics based on the age and service distribution of GNP and TELCO employees respectively. The calculations utilized pre- and post-65 per capita claim amounts that bear the same relationships to each other as do the pre- and post-65 BLIs for GNP and TELCO. All assumptions other than withdrawal, and retirement age (already discussed) were as follows:

discount rate - 8.13%
trend rate - 10.08% in 1991 decreasing gradually to 5.56% for the year
2006 and later
retirement eligibility - 55
amortization period for transition obligation - 20 years
percent married - 65%

BLI Calculations

The calculation of individual plan Benefit Level Indicators used the following data and methods.

A data base of annual claim amount distributions was used, based on the experience of 39,436 retirees who participate in employer sponsored post-retirement medical programs administered by a large national insurance company. For pre- and post-65 claimants, frequency weights, monetary weights, hospital/

drug/other ratios and Medicare reimbursements by type were developed. This data base has 35 claim ranges with average claim amounts in each range from \$15 to \$48,753.

The calculations also used our data base of the post-retirement medical plan provisions for 830 private sector employers. For both comprehensive and base plus plans the following data items were available;

- ° hospital room and board, either as days covered or a percentage
- ° surgical coverage
- ° in-patient physician coverage
- ° out-patient physician coverage
- ° diagnostic coverage
- ° prescription drug coverage, either percentage or flat dollar co-pay
- ° major medical deductibles
- ° major medical co-pay percentage
- ° out-of-pocket maximums
- ° annual/lifetime maximums
- ° Medicare integration method (i.e., carve-out, supplement or coordination of benefits)
- ° participant and dependent contribution rates

These provisions are available separately for pre- and post-65 claimants.

A particular plan's gross BLI was computed by determining how much the plan would reimburse at each claim amount in the distribution data base. The reimbursement amount was determined separately for each type of charge; e.g., hospital, drug, etc. Medicare reimbursement was taken into account explicitly for each type of charge based on the form of Medicare integration in the plan. Each reimbursement was then divided by the corresponding claim to obtain a reimbursement ratio. These ratios were then weighted by the claim amount weights in the distribution to determine the gross BLI.

Per retiree contribution rates were then compared to per retiree claim amounts, and that ratio was used as an offset to the gross BLI to determine the final net pre- and post-65 BLIs for each company in the data base.

After average pre- and post-65 BLIs had been determined for GNP and TELCO (see Section III page 11 for methodology), pre- and post-65 weightings were calculated as the percentages of total SFAS 106 cost associated with pre- and post-65 claims, determined using the same methodology as for the Demographic Adjustment. These were then applied to the pre- and post-65 BLIs to develop GNP BLI and TELCO BLI.

By way of illustration, suppose a comprehensive plan pays 80% after a \$200 deductible, subject to an out-of-pocket maximum of \$1,500. After 65, Medicare integration is 'Supplement'. Participants contribute \$10 per month.

In the \$4,000 - \$5,000 claim range, for example, we find the average claim to be \$4,479. Since this is a comprehensive plan, we derive the pre-65 reimbursement utilizing the total claim amount, that is $(4,479 - 200)$ times 80%, or \$3,423. The out-of-pocket maximum has not been met. Therefore, the pre-65 reimbursement ratio in the charge range is 0.7642. The ratios for all ranges are averaged using weights given by the distribution table to determine the gross pre-65 BLI.

The post-65 reimbursement recognizes Medicare integration, in this example the method is Medicare Supplement. We determine the breakdown of charges to be \$1,776 for hospital, \$567 for prescription drugs, and \$2,136 for all other charges. Total Medicare reimbursement is \$2,047 (calculated explicitly from

Medicare provisions) and is immediately taken out; in this case \$1,177 from hospital, \$870 from other medical charges and nothing from drug charges. The plan provisions are then applied to the balance of \$2,432, giving a plan reimbursement of \$1,786 $((2,432 - 200) \times 80\%)$. This produces a post-65 reimbursement ratio of 0.3987 for this claim range. As with the pre-65 case the ratios for all ranges are then averaged using weights given by the distribution table to determine the gross post-65 BLI.

The gross BLIs are then adjusted to reflect participant contributions. Our example here might produce gross BLIs of 0.85 pre-65 and 0.32 post-65. The participant contribution of \$10 per month translates into a reduction in the gross BLIs of 0.03 pre-65 and 0.04 post-65, giving final BLIs of 0.82 and 0.28 respectively.

Appendix C

Part I: Derivation of the Model

I. Households

All households are assumed to be identical and obtain utility from money and leisure as well as each of the m produced goods. Each household solves the following maximization problem

$$(A1) \quad U^* = \max_{(C_i, M, N)} \{C^\gamma (M/P)^{1-\gamma} - (\phi N^{\eta+1})^{1/\eta}\}$$

subject to the constraint that

$$(A2) \quad M + \sum_i P_i C_i = I$$

where

$$(A3) \quad C = (\sum_i \alpha_i C_i^{(\theta-1)/\theta})^{\theta/(\theta-1)}$$

$$(A4) \quad P = (\sum_i \alpha_i P_i^{1-\theta})^{1/(1-\theta)}$$

and C_i is the consumption of produced good i , P_i is the nominal price of produced good i , M is the amount of money held at the end of the period, N is the amount of labor supplied, I is the total nominal value of resources available to the household, C is the bundle of consumption goods defined by the aggregator function in (A3), and P is a price index defined in (A4). (Note that the price index P in (A4) is not the fixed-weight GNP price index. The solution of the model produces prices for each of the m goods which can then be combined to calculate the appropriate fixed-weight GNP price index.) The parameters of the utility function are γ , which equals the share of the household's nominal expenditure on produced goods rather than on money balances; θ , which is the elasticity of substitution between the consumption of any pair of goods; α_i , $i = 1, \dots, m$, which indicate the weight of each good in the household's utility function; η , which is the elasticity of labor supply; and ϕ which characterizes the degree of disutility of labor.

The utility function in equation (A1) is additively separable between (C_i, M) and N . This separability allows us to solve the household's maximization problem in two stages. First, we will maximize utility with respect to C_i and M , and then we will choose the utility-maximizing level of labor supply N . Choosing C_i and M to maximize the utility function in (A1) subject to the constraint in (A2) yields the following first-order conditions:

$$(A5) \quad \alpha_i C_i^{-1/\theta} \gamma C^{\gamma-1+1/\theta} (M/P)^{1-\gamma} = \mu P_i$$

$$(A6) \quad (1-\gamma) C^\gamma (M/P)^{-\gamma/P} = \mu$$

where μ is the Lagrange multiplier on the constraint (A2).

Combining the first-order conditions (A5) and (A6) yields

$$(A7) \quad \alpha_i C_i^{-1/\theta} \gamma C^{(1-\theta)/\theta} M = (1-\gamma) P_i$$

Multiplying both sides of (A7) by C_i and then summing over all i yields

$$(A8) \quad \sum_i P_i C_i = (\gamma/(1-\gamma)) M$$

Substituting (A8) into (A2) yields

$$(A9) \quad M = (1-\gamma)I$$

Substituting (A9) into (A7), summing over all i , and using the definition of the price index in (A4) yields

$$(A10) \quad PC = \gamma I$$

Substituting (A9) into (A7) and then using (A10) yields the demand for good i

$$(A11) \quad C_i = \alpha_i^\theta (P_i/P)^{-\theta} \gamma I/P$$

Substituting (A9) into (A11) yields

$$(A12) \quad C_i = \alpha_i^\theta (P_i/P)^{-\theta} (\gamma/(1-\gamma)) M/P$$

Having solved for the optimal values of C_i and M , we now solve for the optimal value of labor supply N . First, substitute the optimal values of C_i (eq. A11) and M (eq. A9) into the utility function in (A1) to obtain

$$(A13) \quad U^* = \max_N \{ \gamma^\gamma (1-\gamma)^{1-\gamma} (I/P) - (\phi N^{\eta+1})^{1/\eta} \}$$

subject to $I = wN + rK^* + M + \pi$, where π is the (present value of) post-retirement health benefits to be received by the household.

The first-order condition for labor supply N is

$$(A14) \quad \gamma^\gamma (1-\gamma)^{1-\gamma} (w/P) = ((\eta+1)/\eta) (\phi N)^{1/\eta}$$

which can be solved to obtain N^* , the optimal amount of labor supplied

$$(A15) \quad N^* = \nu (w/P)^\eta$$

$$\text{where } \nu = [\gamma^\gamma (1-\gamma)^{1-\gamma} \eta / (\eta+1)]^\eta \phi^{-1}$$

II. Firms

Each of the m goods is produced by competitive firms with Cobb-Douglas production functions. The total production of good i , Y_i , is given by the production function

$$(A16) \quad Y_i = A_i N_i^{\rho_i} K_i^{1-\rho_i} \quad i = 1, \dots, m$$

The firms are assumed to be competitive and thus take the nominal price of their output, P_i , the nominal rental price of capital, r , and the nominal price of labor, $D_i w$, as fixed. Note that the nominal price of labor consists of two parts: w reflects the nominal wage rate excluding the cost of post-retirement health benefits covered by FAS 106. The factor D_i reflects the impact on the cost per unit of labor of post-retirement health benefits covered by FAS 106. For firms that do not offer post-retirement health benefits, $D_i = 1$. For firms that offer such benefits, $D_i > 1$. Competitive firms choose N_i and K_i to maximize

$$(A17) \quad P_i A_i N_i^{\rho_i} K_i^{1-\rho_i} - w D_i N_i - r K_i \quad i = 1, \dots, m$$

The first-order conditions for labor and capital are

$$(A18) \quad \rho_i P_i Y_i / N_i = w D_i \quad i = 1, \dots, m$$

$$(A19) \quad (1-\rho_i) P_i Y_i / K_i = r \quad i = 1, \dots, m$$

Given the nominal wage w and the FAS 106 factor D_i , (A18) determines the amount of labor demanded in sector i ; given the rental price of capital, (A19) determines the amount of capital demanded in sector i .

III. Market Equilibrium

Equilibrium in the factor markets requires that the aggregate amount of labor demanded equal the supply of labor and the aggregate amount of capital demanded equal the supply of capital:

$$(A20) \quad \sum_i N_i = N^*$$

$$(A21) \quad \sum_i K_i = K^*$$

The amount of money demanded equals the amount initially held by consumers

$$(A22) \quad M = M^*$$

The amount of good i produced must equal the amount of good i demanded, so that using (A12) we obtain

$$(A23) \quad Y_i = \alpha_i^\theta (P_i/P)^{-\theta} (\gamma/(1-\gamma)) M/P$$

The nominal value of production must equal the nominal value of total factor payments, including the (present value of the) cost of post-retirement health benefits,

$$(A24) \quad \sum_i P_i Y_i = rK^* + w \sum_i D_i N_i$$

The nominal value of total resources available to the household, I , equals the initial holding of money M^* plus capital income rK^* , wage income, $w \sum_i N_i$, and the present value of post retirement health benefits $\pi = w \sum_i (D_i - 1) N_i$ so that

$$(A25) \quad I = M^* + rK^* + w \sum_i D_i N_i$$

The solution to the model consists of the equilibrium conditions (A20) - (A25), the production functions (A16), the labor demand equations (A18), the capital demand equations (A19), and the definition of the price index (A4).

Part II: Calibration of the model

The model is calibrated so that in the absence of FAS 106 it yields an allocation of labor across sectors that matches the actual allocation of labor across sectors. It is also calibrated such that in the absence of FAS 106, all nominal prices are equal to one.

Inputs to the calibration procedure:

η , the elasticity of labor supply

θ , the elasticity of substitution between the consumption of any two goods

γ , the share of nominal expenditure devoted to produced goods

N_0^* , the initial total amount of labor to be allocated across sectors

K^* , the fixed total amount of capital to be allocated across sectors

ρ_i , the share of labor in total cost in sector i

D_i , the FAS 106 cost factor in sector i (equal to 1 in the absence of FAS 106)

$s_i^N = N_i/N_0^*$, the fraction of labor employed in sector i

In the initial calibration, all nominal prices are set equal to one

$$(B1) \quad P_i = 1, \quad i = 1, \dots, m$$

$$(B2) \quad P = 1$$

The amount of labor initially used in each sector follows directly from the fraction of the labor force employed in sector i , s_i^N , and the total amount of labor employed, N_0^*

$$(B3) \quad N_i = s_i^N N_0^* \quad i = 1, \dots, m$$

Define $s_i^Y = P_i Y_i / \sum_i P_i Y_i$ to be the share of sector i 's output $P_i Y_i$ in total output $\sum_i P_i Y_i$. Then using the labor demand equation (A18) and the fact that the total amount of labor employed is N_0^* , it can be shown that

$$(B4) \quad s_i^Y = (D_i s_i^N / \rho_i) / \sum_i (D_i s_i^N / \rho_i) \quad i = 1, \dots, m$$

Using the capital demand equation (A19) and the fact that the total amount of capital used is K^* , it can be shown that

$$(B5) \quad K_i = [(1 - \rho_i) s_i^Y / \sum_i (1 - \rho_i) s_i^Y] K^* \quad i = 1, \dots, m$$

Normalize $A_1 = 1$ so that the production function in the first sector is

$$(B6) \quad Y_1 = N_1^{\rho_1} K_1^{1-\rho_1}$$

Using Y_1 from (B6), the nominal wage and the nominal rental price of capital can be determined from the first-order conditions (A18) and (A19) for sector 1 to obtain

$$(B7) \quad w = \rho_1 Y_1 P_1 / (D_1 N_1)$$

$$(B8) \quad r = (1-\rho_1) Y_1 P_1 / K_1$$

Now calculate ν in the labor supply curve (eq. A15) as

$$(B9) \quad \nu = N_0^* (P/w)^\eta$$

To calibrate A_i , $i = 2, \dots, m$, substitute the production function (A16) into the first-order condition for labor (A18) and set $P_i = 1$ (eq. B1) to obtain

$$(B10) \quad A_i = (D_i w / \rho_i) (N_i / K_i)^{1-\rho_i} \quad i = 2, \dots, m$$

Now set all prices equal to 1 in the equilibrium condition (A23), and use (A22) to obtain

$$(B11) \quad Y_i = \alpha_i^\theta (\gamma / (1-\gamma)) M^*$$

Summing (B11) over all i we obtain

$$(B12) \quad \sum_i Y_i = (\gamma / (1-\gamma)) M^* \sum_i \alpha_i^\theta$$

Now observe that with $P = P_i = 1$ for all i , equation (A4) implies that

$$(B13) \quad \sum_i \alpha_i^\theta = 1$$

Substituting (B13) into (B12) and rearranging yields

$$(B14) \quad M^* = ((1-\gamma)/\gamma) \sum_i Y_i$$

Finally, substituting (B14) into (B11) and recalling that when $P_i = P = 1$, $s_i^Y = Y_i / \sum Y_i$, we obtain

$$(B15) \quad \alpha_i^\theta = s_i^Y \quad i = 1, \dots, m.$$

APPENDIX 2

**BST'S ESTIMATED 1993 INCREMENTAL INTERSTATE SPAS 106
REVENUE REQUIREMENT (In Millions)**

Total SFAS No. 106 Accrual	\$ 210
Pay-as-you-go Amounts	\$ 26
VEBA Trust Contributions	<u>165</u>
Total Current Accounting	\$ <u>191</u>
Incremental Costs	\$ 19
SFAS 106 Amount Expensed	\$ 186
Current Accounting Amount Expensed	<u>182</u>
Incremental Expense Impact	\$ <u>4</u>
Incremental Interstate Expense Impact	\$.915
Incremental Rate Base Impact	<u>(.028)</u>
Incremental Revenue Requirement	\$ <u>.887</u>